



OFFICE OF COMMISSIONER OF INSURANCE

JOHN W. OXENDINE
COMMISSIONER OF INSURANCE
SAFETY FIRE COMMISSIONER
INDUSTRIAL LOAN COMMISSIONER
COMPTROLLER GENERAL

SEVENTH FLOOR, WEST TOWER
FLOYD BUILDING
2 MARTIN LUTHER KING, JR., DRIVE
ATLANTA, GEORGIA 30334
(404) 656-2056 TDD# (404) 656-4031

SURPLUS LINES BROKER LICENSE APPLICATION

TO THE COMMISSIONER OF INSURANCE OF THE STATE OF GEORGIA:

The undersigned hereby applies for a license as a surplus lines broker and submits the following information:

1. Full Name _____
(Last) (First) (Middle) (Social Security)

2. Business Address _____
(Name of Agency)

(Street and Number) (City) (State) (Zip) (County)

Residence Address _____
(Street and Number) (City) (State) (Zip) (County)

3. I hold a current Georgia resident license as () Agent, () Broker for Property and Allied Lines; Casualty, Surety and Allied Lines.

4. My current Georgia insurance license number is: _____.

5. Enclosures:

() \$300.00 License Fee plus \$15.00 application fee.

() \$50,000.00 Surplus Lines Brokers Bond

I have read, understand and will abide by the Surplus Lines Insurance Law (Sections 33-5-1 through 33-5-59 of the Georgia Insurance Code) and I hereby certify that all the information contained on this application is true and correct to the best of my knowledge and belief.

(Signature of Applicant)

Subscribed and sworn to before me this _____ day of _____, 19____

(Notary Public)

My Commission Expires: _____

GID-109